

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **"Method and system for extracting spine geometrical data"**
the specification of which (check only one item below):

☐ is attached hereto.

☐ was filed as United States application

Serial No _____

on _____

and was amended

on _____

☒ was filed as PCT international application

Number PCT/EP01/00771

on 24 January 2001

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:


PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	00400217.6	27 January 2000	YES
Europe	00402611.8	20 September 2000	YES

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)		Attorneys Docket Number PHFR000095 US
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)		
Jack E. Haken, Reg. No. <u>26,902</u> Michael E. Marion, Reg. No. <u>32,266</u> Edward M. Blocker, Reg. No. <u>30,245</u>		Direct Telephone Calls to: (name and telephone number) (914)332-0222

201	FULL NAME OF INVENTOR	FAMILY NAME GERARD	FIRST GIVEN NAME Olivier	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Paris	STATE OR FOREIGN COUNTRY France <i>FRX</i>	COUNTRY OF CITIZENSHIP France
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 8 rue Sophie Germain	CITY F-75014 Paris	STATE & ZIP CODE/COUNTRY France
202	FULL NAME OF INVENTOR	FAMILY NAME PLANELLS-RODRIGUEZ	FIRST GIVEN NAME Milena	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Toulouse Cedex 4	STATE OR FOREIGN COUNTRY France <i>FRX</i>	COUNTRY OF CITIZENSHIP Spain
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 10 Avenue Edouard Belin-Chbre 455 Res.1	CITY F-31055 Toulouse Cedex 4	STATE & ZIP CODE/COUNTRY France
203	FULL NAME OF INVENTOR	FAMILY NAME MAKRAM-EBEID	FIRST GIVEN NAME Sherif <i>FLX</i>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Dampierre	STATE OR FOREIGN COUNTRY France	COUNTRY OF CITIZENSHIP France
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 30 rue de l'Erable	CITY F-78720 Dampierre	STATE & ZIP CODE/COUNTRY France
204	FULL NAME OF INVENTOR	FAMILY NAME LELONG	FIRST GIVEN NAME Pierre	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Mogent Sur Marne	STATE OR FOREIGN COUNTRY France <i>FRX</i>	COUNTRY OF CITIZENSHIP France
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 6 rue du Jeu de l'Arc	CITY F-94130 Mogent Sur Marne	STATE & ZIP CODE/COUNTRY France
205	FULL NAME OF INVENTOR	FAMILY NAME VERDONCK	FIRST GIVEN NAME Bert Leo Alfons	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Retie	STATE OR FOREIGN COUNTRY Belgium <i>BRX</i>	COUNTRY OF CITIZENSHIP Belgium
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Driesstraat 4	CITY B-2470 Retie	STATE & ZIP CODE/COUNTRY Belgium

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United States Code, and that such wilful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205 	
DATE	DATE 16 August 2001	

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET
NUMBER
PHFR000095 US

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U.S. DEPARTMENT OF COMMERCE - Patent and Trademarks Office
(July 1994)

Combined Declaration For Patent Application and Power of Attorney (Continued)
(includes Reference to PCT International Applications)

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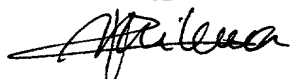
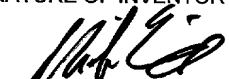
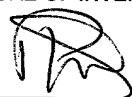
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